

ENTRY BLANK

Cage P

PLEASE TYPE OR PRINT

 Ms. Mr. Artist

Nancy Rae

(Last Name Last)

DO NOT DETACH

Permanent
Address

Box 432

Street

CHAGRIN FALL

City

OH. 44072

Zip

Daytime Tel. (216) 338-8307

Area Code

Temporary or
Studio Address

Street

City

Daytime Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the
Western Reserve, in which county were you born? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

- Artist will pick up at Museum.
- Museum should dispose of.
- Museum should ship to artist at artist's expense
to this address: _____

Special InstructionsWhen necessary include below instructions or a drawing of how
the object is to be assembled and displayed.This Entry Blank must be fully made out and signed. Unsigned
Entry Blanks will not be accepted.Note carefully calendar for delivery and return of objects. It is
understood that the Museum will have the right to dispose for
its own account any objects not called for by the dates listed.It is also understood that accepted objects will remain on
exhibition until July 21, 1985.The submission of objects will be construed as an acceptance
by the artist of all terms and conditions printed in the
Entry Information.

Signature

Nancy Rae

DO NOT DETACH

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Crafts

Materials

Wool & Cotton

Title

Red Square Re-Squared

Price or NFS

NFS

Insurance Value
if NFS Only

300.00

Size

16 x 20

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED
REJECTED	7 (T)	REJECTED

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Crafts

DETACH

Materials

Title

Price or NFS	Insurance Value If NFS Only	Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame

ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED	RECEIVED
REJECTED		REJECTED	DATE
			5/9